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Daniel J. Hudak, Jṛ.	(Depositor's name)
Varied Hardale L	(Signature)
February 28, 2007	(Date)

01 FC:1501 1400.00 OP APPLICATION NO. FILING DATE FIRST NAMED INVENTOR

ATTORNEY DOCKET NO. CNIP-C-PCT-US

CONFIRMATION NO. 2444

TITLE OF INVENTION: MEDICAMENT CONTAINING EPIDEMIUM EXTRACT FOR TREATMENT OF PROSTATIC HYPERPLASIA AND **PROSTATITIS**

Hui Dong

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$1400 NO \$300 \$0 \$1700 nonprovisional 05/21/2007 **EXAMINER** ART UNIT CLASS-SUBCLASS MCCORMICK, MELENIE LEE 1655 424-762000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Hudak, Shunk&&FFarine (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, CO. LPA Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to ☐ "Fee Address" indication (or "Fee Address" Indication form 2 registered patent attorneys or agents. If no name is listed, no name will be printed. PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) BRIGHT FUTURE PHARMACEUTICAL HONG KONG, CHINA LABORATORIES LIMITED Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🚨 Corporation or other private group entity 🔲 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. In the Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-3150 (enclose an extra copy of this form). ☐ Advance Order - # of Copies

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Authorized Signature Daniel J. Hudak, Jr.

February 28, 2007 Date

47,669 Registration No.

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